

CITY OF LINCOLN/LANCASTER COUNTY
CONTRACT AWARD NOTIFICATION
SPECIFICATION NO. 04-099
ANNUAL REQUIREMENTS FOR MEDICAL EQUIPMENT & SUPPLIES FOR
HEALTH DEPARTMENT

DATE: June 24, 2005

CONTRACT PERIOD: June 1, 2005 thru May 31, 2006

CONTRACTOR: Physicians Sales & Service
6600 Crooked Creek Dr.
Lincoln NE 68516

PURCHASING DIVISION
K-STREET COMPLEX
440 SOUTH 8TH STREET
LINCOLN, NEBRASKA 68508
(402) 441-7410

Company Representative: Robert Johnson
Telephone No.: 420-5732
FAX No.: 420-5781
E-Mail Address: rjohnson@pssd.com

THE CITY/COUNTY'S SPECIFICATIONS AND THE CONTRACTOR'S ACCEPTED PROPOSAL AND PRICING SCHEDULES, NOW ON FILE IN THE OFFICE OF THE CITY CLERK AND/OR THE COUNTY CLERK, ARE ADOPTED BY REFERENCE AND ARE AS FULLY A PART OF THIS CONTRACT FOR THE ABOVE-NAMED COMMODITY AS IF REPEATED VERBATIM HEREIN.

PER ATTACHED SPECIFICATION AND BID DATED 04/14/04
Sections 1 and 2

NO ACTION NEED BE TAKEN BY THE CONTRACTOR AT THIS TIME. ORDERS FOR MATERIAL WILL BE MADE AS NEEDED BY THE VARIOUS CITY/COUNTY DEPARTMENTS.

DEPARTMENTS REQUIRING CATALOGS AND/OR PRICING SCHEDULES SHALL NOTIFY THE CONTRACTOR DIRECTLY.

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E.O. #73478
Dated:6/21/05

PROPOSAL
SPECIFICATION NO. 04-099
BID OPENING TIME: 12:00 NOON
DATE: April 14, 2004

The undersigned bidder, having full knowledge of the requirements of the City of Lincoln and County of Lancaster for the below listed items and the contract documents (which include Notice to Bidders, Instructions to Bidders, this Proposal, Specifications, Contract, and any and all addenda) and all other conditions of the Proposal, agrees to sell to the City and the County the Below listed items for the performance of this Specification, complete in every respect, in strict accordance with the contract documents at and for unit prices listed below.

THE REQUIREMENTS FOR:
HEALTH DEPARTMENT MEDICAL EQUIPMENT AND SUPPLIES

<u>BIDDING SCHEDULE</u>			
<u>ITEM</u>	<u>ITEM DESCRIPTION</u>	<u>EACH</u>	<u>BULK PKG.</u>
1.	I.V. Equipment		
1.1	Butterfly- 25 gauge-per box, # per box <u>50</u>	\$ <u>12.00</u>	\$ _____
1.2	Butterfly- 23 gauge-per box, # per box <u>50</u>	\$ <u>12.00</u>	\$ _____
1.3	10 ml Luer lock Syringes-per box, # per box <u>10</u>	\$ <u>9.28</u>	\$ _____
1.4	5 ml Luer lock Syringes-per box, # per box <u>10</u>	\$ <u>14.64</u>	\$ _____
1.5	3 ml Luer lock Syringes-per box, # per box <u>10</u>	\$ <u>19.63</u>	\$ _____
1.6	3 ml Syringes with 1/2" 26 gauge needle-per box, # per box _____	\$ <u>—</u>	\$ _____
1.7	Syringes with 1/2" 25 gauge needle-per box, # per box _____	\$ <u>—</u>	\$ _____
1.8	Syringes with 1" 22 gauge needle-per box, # per box _____	\$ <u>—</u>	\$ _____
1.9	Syringes with 1" 21 gauge needle per box, # per box _____	\$ <u>—</u>	\$ _____
1.10	Alcohol prep Pads-per case, # of boxes per case <u>20</u>	\$ <u>1.61</u>	\$ _____
1.11	2 gal sharps container-per case, # of boxes per case <u>20</u>	\$ <u>3.30</u>	\$ _____
1.12	1 quart sharps container-per case, # of boxes per case <u>100</u>	\$ <u>1.72</u>	\$ _____
1.13	Cotton Balls-per case, # per case <u>2</u>	\$ <u>7.39</u>	\$ _____
1.14	Band-Aids 3/4" X 3"-per box, # per box <u>100</u>	\$ <u>4.30</u>	\$ _____
1.15	Band-Aids, Glitter Strip 3/4" X 3"-per box, # per box <u>100</u>	\$ <u>5.37</u>	\$ _____
1.16	Genie Lancets-per box, # per box <u>200</u>	\$ <u>53.44</u>	\$ _____
1.17	Multi-holder Needle Holder <u>Bg 200</u>	\$ <u>16.00</u>	\$ _____
1.18	Syringe/needle TB 1cc 26g, 3/8 inch safety glide	\$ <u>20.50</u>	\$ _____
1.19	Syringe/needle TB 3cc 23g, 1 inch safety glide	\$ <u>18.98</u>	\$ _____
1.20	Syringe/needle TB 3cc 25b, 5/8 inch safety glide	\$ <u>18.98</u>	\$ _____
1.21	Needle, hypo 20g X 1	\$ <u>—</u>	\$ _____

(Amended)

COMPANY NAME: Physicians Sales + Service

ITEM	ITEM DESCRIPTION	EACH	BULK PKG.
1.22	Needle, hypo 23g X 1	\$ <u>8.42</u>	\$ _____
1.23	Needle, hypo 25g X 2	\$ <u>—</u>	\$ _____
1.24	Needle, hypo 30g X 1	\$ <u>25.88</u>	\$ _____
1.25	Needle, hypo sub Q 26g X 5/8	\$ <u>8.42</u>	\$ _____
2.	Diagnostic		
2.1	Glucose Test Strips-per box, # per box <u>50</u>	\$ <u>32.69</u>	\$ _____
2.2	Glucose Test Controls-per box, # per box <u>2</u>	\$ <u>9.56</u>	\$ _____
2.3	Cholesterol Test Strips-per box, # per box <u>25</u>	\$ <u>66.79</u>	\$ _____
2.4	Cholesterol Test Control-per box, # per box <u>2</u>	\$ <u>23.42</u>	\$ _____
2.5	Urine Control, KovaTrol I with urobil-per box, # per box <u>10</u>	\$ <u>219.00</u>	\$ _____
2.6	Dickson Temp. Recording Charts-Per box, # per box <u>60</u>	\$ <u>274.00</u>	\$ _____
2.7	Dickson Temp. Recording Pens-Per box, # per box <u>6</u>	\$ <u>269.00</u>	\$ _____
2.8	EKG Paper for Elite EK 10	\$ <u>12.44</u>	\$ _____
2.9	EKG Mount Cards for Elite EK 10	\$ <u>44.88</u>	\$ _____
2.10	Bayer 10 SG Urine Dipsticks N-Multi stix per bottle	\$ <u>39.69</u>	\$ _____
2.11	Urine Cups, sterile with screw cap-per case, # per case <u>100</u>	\$ <u>11.50</u>	\$ _____
2.12	Urine Cups, non-sterile with screw cap-per case, # per case <u>100</u>	\$ <u>28.98</u>	\$ _____
2.13	Quidel Quick Vue Pregnancy Kit, HCG kit-Per box, # per box <u>25</u>	\$ <u>64.07</u>	\$ _____
2.14	Quidel HCG Kit Control	\$ <u>18.44</u>	\$ _____
2.15	Hemocue HCG Cuvettes	\$ <u>240.00</u>	\$ _____
2.16	Hemocue HCG Control	\$ <u>—</u>	\$ _____
2.17	Abbot Signify Strep A cassette	\$ <u>91.77</u>	\$ _____
2.18	Eletrd Bio Tab- per <u>case</u>	\$ <u>115.00</u>	\$ _____
2.19	Microscope Immersion Oil-per bottle, bottle size <u>1oz.</u>	\$ <u>5.49</u>	\$ _____
2.20	Glass Slides, plain- per gross	\$ <u>3.99</u>	\$ _____
2.21	Glass Slides, frosted- per gross	\$ <u>4.16</u>	\$ _____

(Amended)

COMPANY NAME: Physicians Sales & Service

2.22	Cover sips, 22 X 22- per ounce	\$ <u>1.84</u>	\$ _____
2.23	13 X 100 glass tubes(wet prep) per box	\$ <u>—</u>	\$ _____
2.24	Transfer Pipettes 500 per box	\$ <u>9.95</u>	\$ _____

3. Supplies

3.1	Sterile cotton tip, 6/ 2 per pkg	\$ <u>2.27</u>	\$ _____
3.2	Cotton Balls 2000/box	\$ <u>7.39</u>	\$ _____
3.3	Adhesive flex Bandage 3/4" X 3" strips	\$ <u>4.13</u>	\$ _____
3.4	4" ACE Bandage	\$ <u>7.33</u>	\$ _____
3.5	Adhesive flex spot round bandage	\$ <u>1.82</u>	\$ _____
3.6	#15 Surgical Blade	\$ <u>12.10</u>	\$ _____
3.7	Tongue Blade Sr 5 3/4"	\$ <u>3.60</u>	\$ _____
3.8	Digital Probe Covers 100/box	\$ <u>8.24</u>	\$ _____
3.9	5 oz paper cups 100/sleeve	\$ <u>1.99</u>	\$ _____
3.10	1 oz medicine cups 100/sleeve	\$ <u>1.06</u>	\$ _____
3.11	Envirocide disinfectant per gallon	\$ <u>21.34</u>	\$ _____
3.12	Dressing Release 2 X 3 <i>Private label Sub</i>	\$ <u>5.30</u>	\$ _____
3.13	Dressing Release 4 X 5	\$ <u>7.23</u>	\$ _____
3.14	Gloves vinyl powder-free Large # <u>100</u> per box	\$ <u>3.79</u>	\$ _____
3.15	Gloves vinyl powder-free Medium # <u>100</u> per box	\$ <u>3.79</u>	\$ _____
3.16	Gloves vinyl powder-free Small # <u>100</u> per box	\$ <u>3.79</u>	\$ _____
3.17	KY Jelly, 4oz tube	\$ <u>.94</u>	\$ _____
3.18	Table Paper 21 X 255, 12 rolls/case	\$ <u>25.89</u>	\$ _____
3.19	Alcohol Prep pad 200/box	\$ <u>1.61</u>	\$ _____
3.20	Scrub Alcohol foam 5.4 oz	\$ <u>5.33</u>	\$ _____
3.21	2 ply sheet drape 40 X 48 (large exam)	\$ <u>11.89</u>	\$ _____
3.22	Towel, prof dental 3 ply white 14 X 18	\$ <u>11.80</u>	\$ _____
3.23	Uncull 3.5mm Trach tube	\$ <u>—</u>	\$ _____
3.24	Medical Kleenex Wipe	\$ <u>.67</u>	\$ _____
3.25	Iodine per gallon	\$ <u>101.58</u>	\$ _____
3.26	De-colorizer per gallon	\$ <u>55.60</u>	\$ _____
3.27	Safranin per gallon	\$ <u>85.34</u>	\$ _____
3.28	Crystal Violet Stain per gallon	\$ <u>13.27</u>	\$ _____
3.29	Aloe-Gaurd Soap per gallon Active Ingredient Chlorxylene 0.50 % w/w	\$ <u>25.90</u>	\$ _____
3.30	Serracult Occult Bld	\$ <u>67.56</u>	\$ _____
3.31	Isopropyl Alcohol per case, # bottles/case <u>12</u>	\$ <u>1.03</u>	\$ _____

(Amended) COMPANY NAME: Physicians Sales & Service

3.32	Envirocide disinfectant per case	\$ <u>21.34</u>	\$ _____
3.33	BKC towlette per case	\$ <u>14.20</u>	\$ _____
3.34	Regular Kleenex per case	\$ <u>35.20</u>	\$ _____
3.35	Safe-Skin small powder-free gloves per case # box per case _____	\$ <u>5.25</u>	\$ _____
3.36	Safe-Skin small lt powder gloves per case # box per case _____	\$ <u>4.26</u>	\$ _____
3.37	Safe-Skin extra-small lt powder gloves per case # box per case _____	\$ <u>4.26</u>	\$ _____
3.38	3VRenata Batteries # CR2450N for an ACCU-CHEK	\$ <u>1.89</u>	\$ _____
Total for Items Bid		\$ <u>2,434.26</u>	\$ _____

BID SECURITY REQUIRED: Yes _____ Amount: _____
No XX

Special provisions for Commodity Term Contracts are included with the specification document. Bidders are urged to read the Special Provisions before completing the following sections of the Proposal.

Contract Extension Renewal is an option: Yes X
No _____

TERM PRICE CLAUSE: BIDDER MUST STATE

- (a) Bid prices firm for the full contract period: yes; or
(b) Bid prices subject to escalation/de-escalation: _____
(c) If (b), state period for which prices will remain firm:
Through _____

INTERLOCAL PURCHASING: The City/County desires to make available to other local government entities of the State of Nebraska, by mutual agreement with the successful bidder, and properly authorized inter-local purchasing agreements, the right to purchase the same services, at the prices quoted, for the period of this contract. Each bidder shall indicate on the Bid Form in the space provided below if he/she will honor Political Subdivision orders in accordance with the contract terms and conditions, in addition to orders from City of Lincoln/Lancaster County.

YES _____ X _____ NO _____

If "YES", Contract supplier or suppliers may honor pricing and extend the contract to political sub-divisions, cities and counties. Terms and conditions of the contract must be met by political sub-divisions, cities and counties. Under no circumstances shall the City of Lincoln/Lancaster County be contractually obligated or liable for any purchases by these political sub-divisions, cities or counties.

VENDOR SERVICES:

- Supply with bid documents your full line Medical Supply catalog.
General Catalog discount offered Depends %.
- Supply with bid a separate listing of available latex-free products.
- Toll-free telephone ordering number 1800 642-1290.
- Does your company have customized internet ordering capability?
Describe: yes, its no charge to cust. your full catalog is available on-line. Call me for password set-up
- Deliveries shall be pre-paid, shipped same-day direct to each ordering location.
Specify shipping method: either our van or UPS
Delivery days next day on-site not to exceed three (3) calendar days.
items
- Shipping address is:
Lincoln/Lancaster Health Department:
3140 N Street
Lincoln NE 68510

(Amended)

COMPANY NAME: Physicians Sales & Service

COMPANY REPRESENTATIVE responsible for the administration of this Agreement:

NAME: Robert Johnson
TITLE: Sales Rep
PHONE NO. 1800 642-1290

AFFIRMATIVE ACTION PROGRAM: Successful bidder will be required to comply with the provisions of the City's Affirmative Action Policy (Contract Compliance, Sec. 1.16). The Equal Opportunity Officer will determine compliance or non-compliance, upon a complete and substantial review of successful bidder's equal opportunity policies, procedures and practices.

The undersigned signatory for the bidder represents and warrants that he has full and complete authority to submit this proposal to the City, and to enter into a contract if this proposal is accepted.

RETURN 2 COMPLETE COPIES OF PROPOSAL AND SUPPORTING MATERIAL.

MARK OUTSIDE OF BID ENVELOPE AS FOLLOWS:

SEALED BID FOR SPEC.04-099

Physicians Sales & Service
COMPANY NAME

Robert E. Johnson
BY (Signature)

6600 Crooked Creek Dr
STREET ADDRESS or P.O. BOX

Robert E. Johnson
(Print Name)

Lincoln NE. 68516
CITY, STATE ZIP CODE

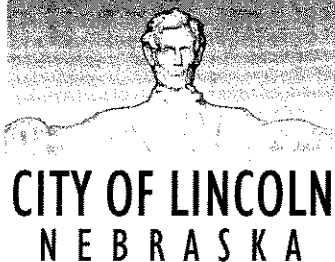
Sales Rep
(Title)

1800 642-1290
TELEPHONE

4-13-04
(Date)

592280364
EMPLOYER'S FEDERAL I.D. NO.
OR SOCIAL SECURITY NUMBER

Bids may be inspected in the Purchasing Division offices during normal business hours, after tabulation by the purchasing agent. If you desire a copy of the bid tabulation to be mailed to you, you must enclose a self-addressed stamped envelope with your bidding documents. Bid tabulations can also be viewed on our website at: <http://www.ci.lincoln.ne.us/city/finance/purch/specindx.htm>



Purchasing Division / Finance Department
Vince M. Mejer, Purchasing Agent
440 South 8th Street
Suite 200, Southwest Wing
Lincoln, Nebraska 68508

402-441-7410
fax: 402-441-6513

LINCOLN
The Community of Opportunity

MAYOR COLEEN J. SENG

lincoln.ne.gov

April 4, 2005

Physicians Sales & Service
6600 Crooked Creek Drive
Lincoln NE 68516

Attn: Robert Johnson

RE: ANNUAL REQUIREMENTS FOR MEDICAL EQUIPMENT AND SUPPLIES FOR HEALTH DEPT., SPECIFICATION 04-099

In accordance with the terms and conditions of the above referenced contract, the City of Lincoln/Lancaster County Desires to **renew the contract** for one (1) additional term beginning June 1, 2005 thru May 31, 2006.

It is understood that all terms of payment and other conditions of the original contract will remain unchanged during the renewal term.

As evidence of your company's desire to renew the above referenced contract under its original terms and conditions, please countersign below. **Return** the original letter, on or before **April 20**, 2005 for processing of the contract renewal by the City of Lincoln/Lancaster County.

If your company should choose **not** to renew this contract in it's original form, please **state** on your letterhead the **reasons** and return to the City of Lincoln/Purchasing Dept, 440 So. 8th, Suite 200, Lincoln, NE 68508.

Sheila Williams
Senior Office Assistant

Company Name Physician Sales & Service
Company Address 6600 Crooked Creek Dr Lincoln NE 68516
Phone No. 402-420-5732 - 1-800-726-7764
FAX No. 913-491-3383 Local 420-5781
E-Mail Address RJohnson@PSSD.com
By(print) Robert Johnson
Title Sales Rep
Date 4-7-05
Signature Robert Johnson